



2001 Consumer Perception Survey

Qualitative Analysis of Written Comments

Arizona Department of Health Services
Division of Behavioral Health Services
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**2001 Consumer Perception Survey
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FY 2001 CONSUMER PERCEPTION SURVEY QUALITATIVE ANALYSIS OF WRITTEN COMMENTS

Executive Summary

In April 2001, the Arizona Department of Health Services, Division of Behavioral Health Services (ADHS/DBHS) and the Regional Behavioral Health Authorities (RBHAs) jointly conducted a statewide consumer perception survey. Three distinct surveys, based on the Substance Abuse and Mental Health Services Administration's Mental Health Statistics Improvement Program (MHSIP) Consumer Surveys, were utilized to solicit independent feedback from the adults, families, and youth receiving services through Arizona's publicly funded behavioral health system. In addition to the core survey questions, which used a 5-point Likert scale, each survey provided an opportunity for survey respondents to offer written comments in response to open-ended prompts.

This report contains a qualitative analysis on the written comments submitted by survey respondents. Comments were analyzed by Geographic Service Area (GSA) to allow for the identification of region-specific themes. Analysis of comments began with the categorization of responses as belonging to one or more of three general domains (*access*, *quality/appropriateness*, or *outcomes*). Comments were also categorized according to whether they were reflective of the respondent's satisfaction, or dissatisfaction, with one or more aspects of care. Comments belonging to each domain were then reviewed for the presence of themes.

The following statewide themes were identified as a result of this analysis:

- Respondents experienced problems due to high staff turnover, lack of sufficient staff, and/or the high caseloads of staff.
- Although psychiatric services and therapy/counseling services are viewed as the most helpful services, respondents identified difficulty with accessing these services in many parts of the state.
- Respondents view personal qualities of staff such as respect, sensitivity, helpfulness, patience, supportiveness, and kindness as extremely important. However, there appears to be a need for further development of these qualities in the staff providing services.
- Although many respondents commented positively on the professional skills of the clinical staff providing services, there is still a perceived need for more highly trained and experienced staff.
- Respondents appreciate clinical staff who listen, involve them in treatment, and provide information to assist in the management of their illness. While numerous respondents indicated satisfaction with these aspects of care, there appears to be room to improve performance in these areas.
- The ability to contact and receive assistance from clinical staff between regularly scheduled appointments is seen as very helpful by survey respondents. However, many respondents identified staff non-responsiveness (e.g. not returning phone calls, lack of follow-up) as an area in need of improvement.

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INTRODUCTION

In April 2001, the Arizona Department of Health Services, Division of Behavioral Health Services (ADHS/DBHS) and the Regional Behavioral Health Authorities (RBHAs) jointly conducted a statewide consumer perception survey. Three distinct surveys, based on the Substance Abuse and Mental Health Services Administration's Mental Health Statistics Improvement Program (MHSIP) Consumer Surveys, were utilized to solicit independent feedback from the adults, families, and youth receiving services through Arizona's publicly funded behavioral health system. A statewide report containing the results of the FY 2001 Consumer Perception Survey was completed in October 2001.¹

In addition to the core survey questions, which used a 5-point Likert scale, each of the three surveys utilized in the FY 2001 Consumer Perception Survey provided an opportunity for survey respondents to offer written comments in response to open-ended prompts. The purpose of this report is to present the results of a qualitative analysis completed on the written comments submitted by survey respondents, which may lead to a more complete understanding of the FY 2001 Consumer Perception Survey results.

This report is limited to analyzing the feedback gathered from the open-ended questions of the surveys. Although the comments were analyzed using the general domains of access, quality/appropriateness, and outcomes, they were not linked to the quantitative results of the survey. Further analysis along this line cannot be completed due to a missing link between the two databases. The reader should therefore observe caution in trying to interpret the quantitative and qualitative responses that were analyzed and reported separately.

METHODOLOGY

The comments analyzed in this report are the verbatim written responses to the open-ended prompts contained within the adult, family and youth surveys. The family and youth surveys elicited respondent comments by utilizing the following two prompts:

"What has been the most helpful thing about the services you and your child received over the last 6 months?"

"What would you recommend to improve services?"

The adult survey elicited respondent comments by utilizing the following prompt:

"Please use the space below to write any other comments or suggestions you have."

Due to the identical nature of the two open-ended questions in the family and youth surveys, and the relatively small number of respondents to each of these surveys, comments received from both surveys were analyzed together. However, the origination of each comment (i.e. family or youth survey) was preserved throughout the course of the analysis to facilitate identification of any themes emerging exclusively from either of the two

¹ Copies of the FY 2001 Consumer Perception Survey Statewide Report are available through the ADHS/DBHS Bureau of Quality Management and Evaluation. The reader is strongly encouraged to read the verbatim written comments of survey respondents, which are included in the appendices of the report.

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surveys. Comments from the adult survey were analyzed independently from the family and youth survey comments. Comments were analyzed by Geographic Service Area (GSA) to allow for the identification of region-specific themes.

Each RBHA, with the exception of CPSA, provided ADHS/DBHS with an MS Access database containing the verbatim comments of survey respondents by survey type (adult, family or youth).² Survey comments from CPSA were provided to ADHS/DBHS in a MS Word document, and were subsequently transcribed into an MS Access database by ADHS/DBHS staff. This database was then used to facilitate the coding and categorization of survey comments, as described below.

Analysis of comments began with the categorization of responses as belonging to one or more of three general domains (*access*, *quality/appropriateness*, or *outcomes*). *Access* refers to the consumer's perception of whether or not services can be easily and conveniently obtained. *Quality/Appropriateness* refers to the consumer's perception of the type, amount, and level of clinical services that are delivered to promote the most positive outcome. *Outcome* refers to the consumer's perception of whether the services provided have had a favorable or unfavorable effect on the consumer's symptoms or problems.

Comments that were indecipherable or did not otherwise provide analyzable material (e.g. the comment was "N/A" or "No comment", or had no discernable relevance) were excluded from the analysis. Comments containing statements that fell into more than one domain were categorized as belonging to each of the domains. For example, a comment containing remarks pertaining to both *access* and *quality/appropriateness* (e.g. "...I have been treated with respect and kindness. I'm sure if there were funds, there would be a center on the southeast side too") was categorized as belonging to each of these domains for the purpose of analysis.

Comments were also categorized according to whether they contained positive or negative statements with respect to the respondent's experience as a consumer within the behavioral health service delivery system. Comments categorized as positive were considered to be indicative of satisfaction with one or more aspects of care. Comments categorized as negative were considered to be indicative of dissatisfaction with one or more aspects of care. Comments containing both positive and negative statements were considered to be indicative of mixed satisfaction.

Comments belonging to each domain were then reviewed for the presence of themes. A theme was identified when at least five percent (5%) of the total comments generated by the survey prompt pertained to a specific topic.³ The themes identified as a result of this process are reported in the results section below.

² Although some RBHAs included a valid survey ID number with each comment, others did not. This resulted in an inability to match respondent comments with respondent demographics, thus precluding the segregation and analysis of survey comments by client type, such as program type (e.g. SMI, GMH, SA), funding source. (i.e. TXIX/XXI versus subvention), etc.

³ Due to the small number of comments received from CPSA 3, a topic was considered a theme for this GSA if more than one comment pertaining to the topic was received.

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RESULTS

CPSA-3

Family/Youth Survey Comments

Twenty-one (21) of the 24 CPSA-3 respondents to the family and youth surveys provided a written response to the open-ended question ***“What has been the most helpful thing about the services you received in the last 6 months.”*** As might be expected by virtue of the question structure (i.e. designed to elicit information about what was helpful), all of the respondents made comments that reflected their satisfaction with one or more aspects of the care that they received. Several (N = 11) individuals indicated that one or more specific services had been the most helpful to them. Services most frequently mentioned were as follows:

- Psychiatric services/medications (N = 9)
- Therapy/counseling (N = 5)

There were no comments pertaining to service *accessibility*.

Nearly half (N = 10) of the survey respondents made comments related to various aspects of service *quality/appropriateness*. Comments were centered around particular characteristics of the respondents' relationship with provider clinical staff. These included:

- Positive comments about the personal qualities of staff such as sensitivity, patience, helpfulness and supportiveness (N = 5)
- Positive comments regarding staff's efforts to listen to, explain things, and/or involve the client/family in treatment decisions (N = 3)
- Positive comments related to staff being easily accessible and/or available to support the respondent when needed (N = 2)

Two comments pertained to service *outcomes*. Both identified a specific positive outcome experienced by the child and/or family as a result of treatment.

Fifteen (15) respondents provided a written response to the question ***“What would you recommend to improve services.”***

One-third (N = 5) of the respondents provided recommendations related to the *accessibility* of services, however, no themes were apparent (i.e., only one person mentioned the issue). Comments were related to the following issues: waiting too long in the waiting room; difficulty making appointments when more than one child is being seen; difficulty making appointments when more than one person is involved; appointments too far away; need for Saturday hours.

Almost two-thirds (N = 11) of the recommendations pertained to aspects of service *quality/appropriateness*, most having to do with staff-related issues. Themes identified were as follows:

- Comments signifying the respondent's general satisfaction with the services provided (N = 4)
- The need for better trained/more qualified staff (N = 3)
- A need to involve/communicate more with the child and/or his/her parents (N = 2)
- High staff turnover and its negative impact on continuity of care (N = 2)

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There were no comments pertaining to service *outcomes*.

Adult Survey Comments

Forty-two (42), of the 74 CPSA-3 survey respondents provided a written comment in response to the open-ended prompt “***Please use the space below to write any other comments or suggestions you have.***” Approximately one-third (N = 15) of survey respondents provided a comment indicating their satisfaction with one or more aspects of care. Slightly over one-third (N = 17) provided comments suggesting that they were dissatisfied with one or more aspects of care. Eight respondents indicated mixed satisfaction.

Less than one-fourth (N = 10) of survey respondents commented on issues related to service *accessibility*. Frequently mentioned topics were as follows:

- The need for increased funding to increase service availability (N = 3)
- The need for additional, more convenient, service locations (N = 2)
- Unavailable or untimely crisis services (N = 2)
- Financial barriers to accessing treatment (N = 2)

Over three-quarters (N = 34) of the survey comments addressed various aspects of service *quality/appropriateness*. Major themes are as follows:

- Positive remarks about the personal qualities of staff, such as respectfulness, patience, helpfulness and insightfulness (N = 10)
- A need for staff to communicate better with the client and/or listen more to client input (N = 3)
- Comments about high staff turnover and/or high caseloads and its negative impact on continuity of care (N = 3)
- A need for better-trained, and/or more qualified clinical staff (N = 2)
- A need for better-trained, and/or more polite front office staff (N = 2)
- Satisfaction with the “women’s group” (N = 2)
- Ambience of treatment facility is displeasing or uncomfortable (N = 2)

There were nine comments that specifically related to treatment *outcomes*. Most identified positive treatment outcomes, however, two indicated a negative outcome (i.e. the respondent attributed a deterioration in his/her psychiatric condition, health status, and/or social circumstances to the behavioral health care that he/she had received).

CPSA-5

Family/Youth Survey Comments

Sixty-two (62) of the 71 CPSA-5 respondents to the family and youth surveys provided a written response to the open-ended question “***What has been the most helpful thing about the services you received in the last 6 months.***” The great majority of respondents made comments that reflected their satisfaction with one or more aspects of the care that they received. However, the comments of five respondents were indicative of mixed satisfaction, and four respondents were clearly dissatisfied with the care they had received.

Almost half (N = 27) of the survey respondents identified one or more specific services that had been helpful. Specific themes are listed below:

- Therapy/counseling (N=8)
- Psychiatric services/medications (N = 6)
- Anger management classes (N = 3)

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Six respondents commented on issues related to service *accessibility*, with the following theme emerging:

- Inconsistent or unavailable therapy services (N = 3)

About one-third (N = 23) of the comments addressed various aspects of service *quality/appropriateness*. Comments were centered around four major themes. Specifically:

- Satisfaction with the availability of specific provider staff (e.g. therapist, psychiatrist, behavior specialist, etc.) when needed (N = 8)
- Positive remarks about the qualities of clinical staff, such as a desire to help, ability to relate, supportiveness, caring, sensitivity, and patience (N = 7)
- Positive comments relating to the efforts of clinical staff to listen to, explain things, and/or involve the client/family in treatment decisions (N = 6)
- Positive comments pertaining to the quality/appropriateness of the services provided, particularly psychiatric services (N = 5)
- Positive comments regarding the professionalism and expertise of staff (N = 4)

Twenty-four (24) of the comments received were related to treatment *outcomes*. All but three reported positive outcomes.

Fifty-eight (58) of the 71 CPSA-5 respondents to the family and youth survey provided a written response to the open-ended question ***“What would you recommend to improve services.”***

Although less than one-fourth (N = 10) of survey respondents provided recommendations related to service *accessibility*, two themes were noted:

- Difficulty getting into the system/services not provided quickly enough (N = 3)
- Unavailable, or inconsistently available therapy services, attributed to not having enough staff to provide these services (N = 3)

Over half (N = 38) of the survey respondents provided comments related to service *quality/appropriateness*. Themes identified are as follows:

- Satisfied with service quality/appropriateness (N = 8)
- Counseling not provided as frequently as needed (N = 8)
- Negative impacts on service quality/consistency due to lack of staff and/or staff turnover (N = 7)
- A need for more supervision and/or education of staff on the treatment of children (N = 4)
- The need for more/better coordination with the school system (N = 3)
- Negative comments about specific provider agencies (N = 3)
- The need for improved staff interactions with clients (e.g. treat more positively, listen to them) (N = 3)
- Inefficient/problematic appointment-making and/or message-taking processes (N = 3)

Only one individual provided an *outcome* related response to this question. This person commented on the type of outcome he/she was hoping to achieve as a result of services.

Adult Survey Comments

Eighty-three (83), of the 140 CPSA-5 adult survey respondents provided a written comment in response to the open-ended prompt ***“Please use the space below to write any other comments or suggestions you have.”***

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Over one-third (N = 30) of survey respondents provided a comment indicating their satisfaction with one or more aspects of care. Roughly the same number of respondents (N = 31) provided comments suggesting that they were dissatisfied with one or more aspects of care. Eleven respondents indicated mixed satisfaction.

About twenty percent (N = 18) of survey respondents commented on issues related to service *accessibility*. The following theme was noted:

- Difficulty getting into the system/services not provided quickly enough (N = 8)

Almost two-thirds (N = 52) of survey respondents provided comments addressing various aspects of service *quality/appropriateness*. Themes are as follows:

- Positive remarks about the personal qualities of staff, such as kindness, respectfulness, dedication, politeness, helpfulness and thoughtfulness (N = 10)
- Positive remarks about the professionalism/expertise of staff (N = 10)
- Negative impacts on service quality/consistency due to lack of staff and/or staff turnover (N = 8)
- Remarks about poorly qualified staff and/or staff's unwillingness to listen to the client (N = 7)
- Needed services (e.g. psychiatric appointments, counseling sessions) provided too infrequently (N = 5)
- Remarks pertaining to the poor quality of specific services and/or providers (N = 5)
- Positive remarks about the willingness of staff listen to/consider input from the client (N = 4)

Of the 20 respondents who commented on the *outcome* of their treatment, 14 indicated a positive outcome, four indicated that they had not experienced any improvement, and two related a negative outcome (i.e. the respondent attributed a deterioration in his/her psychiatric condition, health status, and/or social circumstances to the behavioral health care that he/she had received).

EXCEL

Family/Youth Survey Comments

Thirty (30) of the 58 EXCEL respondents to the family and youth surveys provided a written response to the open-ended question ***"What has been the most helpful thing about the services you received in the last 6 months."*** The great majority of respondents made comments that reflected their satisfaction with one or more aspects of care that they had received. However, the comment of one respondent was indicative of mixed satisfaction, and two respondents were clearly dissatisfied with the care they had received.

Over half (N = 16) of the survey respondents identified one or more specific services that had been helpful. Specific themes are listed below:

- Psychiatric services/medications (N = 9)
- Therapy/counseling (N=5)
- Transportation services (N = 2)
- After-school program (N = 2)

Three respondents commented on issues related to service *accessibility*. The only theme noted was as follows:

- Positive comments related to the availability of transportation to/from services (N = 2)

Slightly less than half (N = 12) of the comments pertained to service *quality/appropriateness*. Comments were centered around four major themes. Specifically:

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- Positive comments regarding the availability of staff and their willingness to listen to input from the client (N = 4)
- Positive comments about the personal qualities of staff such as helpfulness, sensitivity, etc. (N = 3)
- Positive comments related to receiving assistance from staff in the coordination of care between other service delivery systems or agencies (N = 2)

Eleven (11) comments were solicited pertaining to treatment outcomes. All but one of the outcomes related by respondents were positive.

Thirty (30) of the 58 EXCEL respondents to the family and youth survey provided a written response to the open-ended question, ***“What would you recommend to improve services.”***

Three respondents provided recommendations related to the *accessibility* of services, however, no themes were noted. Comments were related to the following issues: need for improved transportation; services/programs not available due to lack of (system) funds to develop/provide these services; the need for a hospital treatment center located in the area so the child could be placed there during crisis.

The majority (N = 24) of respondents provided comments related to service *quality/appropriateness*. Themes identified are as follows:

- The need for staff with more skills/expertise in the treatment of children (N = 5)
- The desire for increased involvement of family members in treatment (N = 5)
- Negative impacts on service quality/consistency due to staff turnover (N = 4)
- The need for more consistency among staff in the treatment of the child/family (N = 2)
- The desire to participate in services/treatment program for a longer period of time (N = 2)
- The need to wait until school is over for the day before transporting the child to the after school program (N = 2)

No respondents provided an *outcome*-related response to this question.

Adult Survey Comments

Eighty-nine (89), of the 193 EXCEL adult survey respondents provided a written comment in response to the open-ended prompt ***“Please use the space below to write any other comments or suggestions you have.”*** Over half of these respondents provided a comment indicative of satisfaction with one or more aspects of care, while slightly more than one-fourth of the responses were indicative of dissatisfaction. Twelve respondents provided comments suggesting mixed satisfaction.

Only four survey respondents commented on issues related to service *accessibility*, and no themes were apparent. Comments were related to the following issues: the need to keep psychiatrists year-round in Yuma; individual waiting to start therapy again but AHCCCS was cut-off; office too far for appointments; appreciation of transportation provided.

Over three-fourths of the comments addressed various aspects of service *quality/appropriateness*. Major themes are as follows:

- Positive remarks related to the respondent's satisfaction with the services provided (N = 21)
- Negative remarks about a lack of staff responsiveness and/or an unhelpful relationship with the client (e.g., not returning phone calls, unwillingness to listen to the client (N = 9)
- Negative impacts on service quality/consistency due to inconsistent staff and/or staff turnover (N = 7)

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- Positive remarks about the knowledge and/or professionalism of staff (N = 7)
- Positive remarks about the personal qualities of staff, such as patience, understanding, trustworthiness, etc. (N = 5)
- General remarks related to the respondent's satisfaction with the staff providing services (N = 5)

Of the 28 respondents who commented on the *outcome* of their treatment, all indicated a positive outcome with the exception of one who indicated a mixed outcome, and two who related a negative outcome (i.e. the respondent attributed a deterioration in his/her psychiatric condition, health status, and/or social circumstances to the behavioral health care that he/she had received).

NARBHA

Family/Youth Survey Comments

Forty-seven (47) of the 79 NARBHA respondents to the family and youth surveys provided a written response to the open-ended question ***“What has been the most helpful thing about the services you received in the last 6 months.”*** The majority of respondents made comments that reflected their satisfaction with one or more aspects of the care that they received. However, one respondent indicated mixed satisfaction, and seven respondents were clearly dissatisfied with the care they had received.

Eighteen (18) survey respondents identified one or more specific services that had been helpful. Specific themes are listed below:

- Psychiatric services/medications (N = 12)
- Therapy/counseling (N=6)

Only two respondents commented on issues related to service *accessibility*, and no themes were noted. Comments were related to the following issues: counselor provides services in the home; trouble getting the help necessary due to financial responsibilities.

Over three-fourths (N = 31) of the comments addressed various aspects of service *quality/appropriateness*. Comments were centered around the following major themes:

- General satisfaction with services/service quality (N = 7)
- Positive comments about staff and their qualities, such as understanding, helpfulness, etc. (N = 6)
- Positive comments about the support provided to the family (e.g., backed family's position, coordinated with school, etc.) (N = 6)
- Good communication between the client/family and the clinical staff providing services (e.g., listened to input, got to know family, etc.) (N = 4)
- Positive comments about services being available at a sufficient frequency (N = 3)
- Ability to speak with clinician via telephone between in-person visits (N = 3)

Seven of the comments that dealt on treatment *outcomes* were all positive.

Forty-seven (47) of the 79 NARBHA respondents to the family and youth surveys provided a written response to the open-ended question ***“What would you recommend to improve services.”***

Although few (N = 5) respondents provided recommendations related to the *accessibility* of services. The following theme was noted:

- The need for more counseling/therapy services (N = 3)

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Over half (28) of the respondents provided comments related to service *quality/appropriateness*. Themes identified are as follows:

- The need for additional/more consistent staff to provide services (N = 9)
- The need for more empathetic/professional treatment by staff (N = 5)

No individuals provided responses related to *outcome*.

Adult Survey Comments

One-hundred and twenty-one (121), of the 257 NARBHA adult survey respondents provided a written comment in response to the open-ended prompt “***Please use the space below to write any other comments or suggestions you have.***” Over forty percent (N = 51) of survey respondents provided a comment indicating their satisfaction with one or more aspects of care. A roughly equal amount (N = 52) provided comments suggesting that they were dissatisfied with one or more aspects of care. Thirteen respondents indicated mixed satisfaction.

Less than one-quarter (N = 15) of respondents commented on issues related to service *accessibility*. The following theme was identified:

- Comments about having to wait a long time to receive initial services, or in between office visits (comments were primarily pertaining to psychiatric services) (N = 6)

Over three quarters (N = 92) of the comments addressed various aspects of service *quality/appropriateness*. Major themes are as follows:

- Positive comments indicating general satisfaction with the services provided (N = 14)
- Comments related to high turnover, understaffed services, and/or the need for additional/more consistent staff to provide services (comments were primarily pertaining to psychiatric services) (N = 10)
- Positive comments about the professionalism/expertise of staff (N = 9)
- Positive remarks about the personal qualities of staff, such as helpfulness, supportiveness, caring, etc. (N = 8)
- Positive comments about satisfaction with the staff providing services (N = 8)
- Comments about the staff being unqualified, inexperienced or unprofessional in their interactions with the client (N = 5)

Of the 25 respondents who commented on the *outcome* of their treatment, most identified one or more positive outcome. Only three related a negative outcome (i.e. the respondent attributed a deterioration in his/her psychiatric condition, health status, and/or social circumstances to the behavioral health care that he/she had received).

PGBHA

Family/Youth Survey Comments

Seventy-nine (79) of the 114 PGBHA respondents to the family and youth surveys provided a written response to the open-ended question “***What has been the most helpful thing about the services you received in the last 6 months.***” The majority of respondents made comments that reflected their satisfaction with one or more aspects of the care that they received. However, two respondents indicated mixed satisfaction, and one respondent was clearly not satisfied with the care his/her child had received.

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Almost half (N = 28) of the survey respondents identified one or more specific services that had been helpful. Specific themes are listed below:

- Therapy/counseling (N=17)
- Psychiatric services/medications (N = 14)

Seven respondents commented on issues related to service *accessibility*. One theme was identified, as follows:

- Positive remarks regarding appointments being scheduled at convenient times (N = 5)

There were 31 comments addressing various aspects of service *quality/appropriateness*. Comments were centered around the following major themes:

- Positive comments regarding the availability/responsiveness of staff (e.g. available when the client/parent needs to talk, willingness to listen, etc.) (N = 16)
- Positive comments about the personal qualities of staff, such as respectfulness, understanding, helpfulness, supportiveness, patience, etc. (N = 15)
- Positive comments pertaining to the professionalism and expertise of the staff providing services (N = 6)

About two-thirds (N = 25) of the respondents commented on the *outcome* of their child's treatment. All identified one or more positive outcomes, with the exception of one respondent who indicated that his/her child did not experience improvement.

Seventy-nine (79) of the 114 PGBHA respondents to the family and youth surveys provided a written response to the open-ended question ***"What would you recommend to improve services."***

Less than one-fourth (N = 11) of respondents provided recommendations related to the *accessibility* of services. The following theme was identified:

- The need for additional/more consistent staff to provide services (particularly counseling and psychiatry) (N = 7)

Well over half (N = 54) of the respondents provided comments related to service *quality/appropriateness*. Themes identified are as follows:

- The need for staff who are qualified/knowledgeable in providing services to children (N = 7)
- Positive comments reflecting general satisfaction with the services received (N = 6)
- The desire for more information about the various aspects of treatment such as diagnosis, progress being made, the treatment options available, and expectations with regard to progress (N = 6)
- The desire for more contact/monitoring of client progress in between scheduled appointments (N = 4)
- The need to spend more time with clients during scheduled appointments (N = 4)

No individuals provided comments related to *outcome*.

Adult Survey Comments

One-hundred and seventy six (176), of the 332 PGBHA adult survey respondents provided a written comment in response to the open-ended prompt ***"Please use the space below to write any other comments or suggestions you have."*** Slightly under one-third (N = 55) of survey respondents provided a comment indicative of satisfaction with one or more aspects of care, while slightly under half (N = 78) of the responses were

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indicative of dissatisfaction with one or more aspects of care. Eighteen respondents indicated mixed satisfaction.

Relatively few (N = 18) respondents commented on issues related to service *accessibility*. A variety of topics having to do with access were mentioned, but none of them were mentioned frequently enough to be considered a theme. Comments were related to the following issues: hospital is a two-hour drive from house; site too far away (over 70 miles one way); provider locations should be centralized; pleased about having access to services; clinic not available after-hours for crisis; lack of transportation; would like more services but Champus insurance does not pay for much; drug and alcohol facility needed in Payson; has not been in program yet due to a waiting list; need more parking spaces at new location; in the past was turned away from services due to lack of funding for services; cannot afford medications and does not qualify for subsidies; a few years ago, services were not available due to a waiting list; no insurance so cannot afford weekly therapy and medications.

Slightly less than two-thirds (N = 111) of the survey respondents provided comments addressing various aspects of service *quality/appropriateness*. Themes are identified as follows:

- Positive remarks about the personal qualities of staff, such as courtesy, consideration, kindness, respectfulness, friendliness, etc. (N = 22)
- Positive comments indicating general satisfaction with the services provided (N = 16)
- Positive comments about the availability of staff, when needed (N = 10)
- Comments related to high turnover, inconsistent staff, and/or the need for more staff to provide services (comments were primarily pertaining to psychiatric services) (N = 9)

Of the 45 respondents who commented on the *outcome* of the treatment received, most referred to one or more positive outcomes. Two indicated a mixed outcome, and four related a negative outcome as a result of services (i.e. the respondent attributed a deterioration in his/her psychiatric condition, health status, and/or social circumstances to the behavioral health care that he/she had received).

ValueOptions

Family/Youth Survey Comments

Eighty-one (81) of the 119 ValueOptions respondents to the family and youth surveys provided a written response to the open-ended question ***“What has been the most helpful thing about the services you received in the last 6 months.”*** The great majority of respondents made comments that reflected their satisfaction with one or more aspects of care that they received. However, the comments of four respondents were indicative of mixed satisfaction, and seven respondents were clearly dissatisfied with the care they had received.

Almost half (N = 31) of the survey respondents identified one or more specific services that had been helpful. Specific themes are listed below:

- Psychiatric services/medications (N = 14)
- Therapy/counseling (N=6)
- Financial assistance (e.g. with purchasing medications) (N = 4)

Although relatively few (N = 11) respondents commented on issues related to service *accessibility*, one theme was identified:

- Satisfaction with the ability to schedule appointments/receive treatment at convenient times (N = 5)

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Slightly under half (N = 36) of the comments addressed various aspects of service *quality/appropriateness*. Comments were centered around the following major themes:

- Positive comments about staff and their qualities, such as kindness, understanding, compassion, interest, encouragement, respect, etc. (N = 13)
- Good communication between the client/family and clinical staff (e.g., listened to input, provided information, etc.) (N = 11)
- Positive comments indicating general satisfaction with the services provided (N = 9)
- Positive comments regarding the professionalism and expertise of staff (N = 4)
- Negative comments about the attributes of staff (e.g., do not listen, not qualified) (N = 4)
- Staff were not sufficiently available/did not return calls (N = 4)

Of the 22 respondents who commented on the *outcome* of the treatment received, only one identified a negative outcome as a result of services. This individual indicated that he/she felt the services did more harm than good.

Eighty-one (81) of the 119 ValueOptions respondents to the family and youth surveys provided a written response to the open-ended question ***“What would you recommend to improve services.”***

Almost one-fourth (N = 19) of survey respondents provided recommendations related to the *accessibility* of services. Although several topics related to access were touched upon, only one topic was mentioned by enough respondents to be considered a theme:

- The need for better access to psychiatrists (N = 5)

Over half (N = 45) of the respondents provided comments related to service *quality/appropriateness*. Themes identified are as follows:

- Positive comments indicating satisfaction with service quality/appropriateness (N = 7)
- The need to provide more consistency with services during client transitions (e.g., between service delivery settings, from children’s services to adult services, when there is a change in providers (N = 4)
- The need for more treatment options and/or more effective services (N = 4)
- The need to spend more time with the client during a scheduled appointment (e.g. evaluations, medication reviews, etc.) (N = 4)

Only three individuals provided a response related to *outcome*. One referred to a positive outcome he/she experienced, one referred to the absence of a positive outcome, and the third referred to the type of outcome he/she was hoping to achieve as a result of services.

Adult Survey Comments

One-hundred and seventy six (176), of the 316 ValueOptions adult survey respondents provided a written comment in response to the open-ended prompt ***“Please use the space below to write any other comments or suggestions you have.”*** Slightly over one-third (N = 63) of survey respondents provided a comment indicative of satisfaction with one or more aspects of care, while a slightly higher number (N = 71) of respondents indicated their dissatisfaction with one or more aspects of care. Eighteen respondents indicated mixed satisfaction.

Less than one-fourth (N = 23) of survey respondents commented on issues related to service *accessibility*. A variety of topics having to do with access were mentioned, but none of them were mentioned frequently enough to be considered a theme. Comments related to the following issues: insufficient/difficult parking; the need for transportation; unable to get timely assistance during a crisis situation; need for groups on the west-side; need

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for more groups; clinic too far from where client lives; hard to obtain initial services from the agency; hard to see a doctor; better coverage is needed for people with mental health issues; problems with transportation; could not locate treatment program for heroin except in Mesa; does not have the money to go to a hospital anymore; services should be extended to others who do not currently qualify; problems getting housing; more counseling needs to be available.

Three quarters (N = 132) of survey respondents provided comments related to various aspects of service *quality/appropriateness*. Major themes are as follows:

- Positive comments about the professionalism/expertise of specific staff (N = 27)
- Positive comments about the good quality of services provided (N = 20)
- Negative comments about not receiving the services outlined in the treatment plan, and/or not getting the types of services appropriate to the problem (N = 19)
- Negative comments regarding the unavailability/unresponsiveness of staff (e.g., do not return calls, appear uninterested, do not involve client in treatment planning, etc.) (N = 17)
- Positive remarks about the personal qualities of staff, such as helpfulness, consideration, supportiveness, kindness, respectfulness, etc. (N = 15)
- Negative impacts on service quality/consistency due to lack of staff and/or staff turnover (N = 14)
- Cumbersome, inefficient and/or ineffective procedures (e.g. too much intake paperwork, cancellation of appointments and failure to contact client, difficulty getting medication refills) (N = 14)
- Remarks about poorly qualified, unprofessional and/or inexperienced staff (N = 10)
- General dissatisfaction with the quality of the services provided (N = 9)

Of the 34 respondents who commented on the *outcome* of their treatment, many indicated a positive outcome. However, four indicated that they had not benefited from services, and six related a negative outcome services (i.e. the respondent attributed a deterioration in his/her psychiatric condition, health status, and/or social circumstances to the behavioral health care that he/she had received).

DISCUSSION

An analysis of the written comments offered by FY 2001 Statewide Consumer Perception Survey respondents provides an opportunity to gain further insight into the aspects of behavioral health care which are not apparent in the quantitative analysis of the survey results. It provides an opportunity to identify areas of strengths and weaknesses within the behavioral health service delivery system, from the perspective of the consumer and their family member. In this case, several statewide themes are apparent:

- Respondents within every Geographic Service Area reported problems with high staff turnover, lack of sufficient staff, and/or the high caseloads of staff. Respondents voiced concern that the availability, quality and consistency of psychiatric and therapy/counseling services had suffered as a result of these problems. Many respondents indicated that their progress in treatment (or the progress of their child) had been significantly affected by the constant change in clinicians and psychiatrists.
- Respondents identified psychiatric services (including the prescription of psychiatric medications), and therapy/counseling services as the most helpful services. However, there is a perception of poor accessibility to these services in many parts of the state.
- The personal qualities (e.g., respect, sensitivity, helpfulness, patience, supportiveness, kindness) of the clinical staff providing behavioral health services are viewed as extremely important by survey

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respondents. While there are positive feedback regarding this matter, there also appears to be a need for further development of these qualities among staff who interact with the consumers in some areas of the state.

- Although many respondents commented positively on the professional skills of the clinical staff providing services, there is still a perceived need for more highly trained and experienced staff in some areas of the state.
- Survey respondents clearly expressed their appreciation of clinical staff who listen and involve them in treatment. Many respondents also indicated that receiving more information from staff about their illness, medications, potential side effects, treatment options, and progress is very important. While numerous respondents indicated satisfaction with these aspects of care, there appears to be room for improvement in some areas of the state.
- The ability to contact and receive assistance from clinical staff between regularly scheduled appointments is seen as very helpful by many survey respondents. Unfortunately, staff non-responsiveness (e.g. not returning phone calls, lack of follow-up) seems to be an issue in some areas of the state.

Statewide themes will be reviewed in conjunction with relevant findings from other statewide evaluative efforts (e.g. Independent Quality Evaluation, Case File Review, performance indicators, RBHA operational/financial reviews, etc.) to determine if there is additional information that supports the issues identified.

The debriefing sessions with the RBHAs will include a discussion of the analysis in this report. It will be used as a 'springboard' to influence changes in the method of analyzing future survey results and crafting quality improvement strategies. As evidenced by the findings, a close examination of the written comments provided by survey respondents provides valuable information to help inform statewide, and RBHA-specific performance improvement efforts. Planning for the FY 2003 Consumer Perception Survey will include the development of a strategy for conducting a qualitative analysis of survey comments concurrently with the quantitative analysis of survey results. Efforts will also be made to ensure the ability to link respondent comments with demographic data such as race, ethnicity, entitlement status, and program type. This will make it possible to complete a more extensive analysis of respondent comments.

The prompts used to solicit survey comments will also be reviewed. Consideration will be given to using similar prompts for all three surveys, to allow for a better comparison of responses across client populations. It may also be beneficial to devise open-ended questions that are designed to solicit written comments specific to the domains of *access*, *quality/appropriateness*, and *outcomes*. This would encourage respondents to provide their input related to each of these areas, thereby allowing for a more comprehensive analysis.